State of Minnesota District Court County of: Judicial District: Court File Number: Case Type: Housing Affidavit of Service by Mail Plaintiff (first, middle, last) VS. Defendant (first, middle, last) Hearing Date: Time: I, state that on (Name of person who mailed documents) (Date documents mailed) I served a Summons and Complaint in an Eviction action upon (name of person(s) to whom documents were mailed) by placing a true and correct copy of the document in an envelope addressed to the persons at his/her last known address of ______ in the City of , State of Minnesota, and whose Zip Code is , and depositing the envelope, with sufficient postage in the U.S. Mail at the post office located in the City of _______, State of Minnesota. I declare under penalty of perjury that everything that I have stated in this document is true and correct. Minn. Stat. § 358.116. Dated: Signature Name: County and State where signed Address: City/State/Zip: Telephone: E-mail address: